

42D003
7-15

COMMONWEALTH OF KENTUCKY
DEPARTMENT OF REVENUE
FINANCE AND ADMINISTRATION CABINET
FRANKFORT, KY
40620



TO: Employers
DATE: September 15, 2015
SUBJECT: 2015 Kentucky Wage and Tax Statements (W-2/K-2) Order Form

Employers are required to furnish each employee with a wage and tax statement on or before January 31, 2016. This applies to all employees from whose wages tax has been withheld or would have been withheld if no more than one exemption had been claimed.

The Kentucky Department of Revenue maintains a record of the receipt of the wage and tax statements by utilizing the Kentucky Withholding Account Number. It is extremely important that the **correct account number** as assigned by the Kentucky Department of Revenue be entered in the applicable block on the wage statements. Failure to enter the correct account number contributes to delays in processing and possible mishandling of the statements.

The Department of Revenue is providing combination federal and Kentucky wage and tax statements at no charge. The forms consist of all required copies of federal Form W-2 and Revenue Form K-2. Employers must use these official forms or approved commercially printed forms. Federal W-2 forms may be used if the Kentucky tax withheld is clearly identified. Any questions regarding commercially printed forms or magnetic media should be addressed to the Division of Individual Income Tax, Withholding Tax Branch, Station 57, P.O. Box 1274, Frankfort, KY 40602-1274, (502) 564-7287.

Please type or clearly print your name, address, including ZIP code, and number of forms requested on the order form below.

**DO NOT INCLUDE WITHHOLDING TAX PAYMENTS OR RETURNS
WITH THIS ORDER FORM OR THERE WILL BE A DELAY IN PROCESSING.**

Return bottom portion to: **Kentucky Department of Revenue,
Operations and Support Services Branches, P.O. Box 518,
Frankfort, KY 40602-0518**

AN EQUAL OPPORTUNITY EMPLOYER M/F/D

DETACH HERE

Please Fill Out The Label Below With
Your Name and Address.

Name _____

Telephone () _____

FROM: Department of Revenue Frankfort, KY 40620	Enter Quantity Needed in Bundles of:		
TO: Name _____ _____ Street _____ City, State and ZIP Code _____	4		30
	6		50
	10		100
	20		
	W-2/K-2 Quantity _____		